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I hereby certify under 37 C.F.R. § 1.10 that this correspondence "Express Mail Post Office to Addressee" with sufficient post Application, Commissioner for Patents, P.O. Box 1450, Alexander

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UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. § 1.53(b)				
Attorney Docket Number	07891/025005	07891/025005		
Applicant	Robert G. Korneluk et al.	Robert G. Korneluk et al.		
Title	ANTISENSE IAP OLIGO	ANTISENSE IAP OLIGONUCLEOTIDES AND USES THEREOF		
PRIORITY INFORMATION:				
This application is a continuation of U.S.S.N. 09/672,717 (now allowed), filed September 28, 2000.				
SMALL ENTITY STATUS:				
☑ Applicants claim small entity status under 37 C.F.R. § 1.27.				
APPLICATION ELEMENTS:				
Cover sheet		1 page		
Specification		57 pages		
Claims		3 pages		
Abstract		1 page		
Drawings		67 sheets		
Combined Declaration and Power of Attorney, which is:		4 pages		
□ Unsigned;				
□ Newly signed for this applica	ation;			
☑ A copy from prior application disclosure of the prior application part of the disclosure of this neighborhood incorporated by reference ther □ A copy from prior application prior application □ A copy from prior applicatio	ion is considered as being ew application and is hereby			
Sequence Statement		2 pages		
Sequence Listing on Paper		59 pages		
Sequence Listing on Diskette		1 disk		
Preliminary Amendment		[**] pages		
Information Disclosure Statement		[**] pages		
Form PTO 1449		[**] pages		
Cited References		[**] references		
Recordation Form Cover Sheet and Assignment		[**] pages		
English Translation		[**] pages		



Certified Copy of Priority Document	[**] pages
Non-publication Request under 35 U.S.C. § 122(b).	[**] pages
Request for Deferral of Examination under 37 C.F.R. § 1.103(d)	[**] pages
A Small Entity Statement	[**] pages
Return Receipt Postcard	1
FILING FEES:	
Basic Filing Fee: \$375	\$375.00
Excess Claims Fee: 18 - 20 x \$9	\$***
Excess Independent Claims Fee: 2 - 3 x \$42	\$****
Multiple Dependent Claims Fee: \$280/\$140	\$***
Total Fees:	\$375.00
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- ☑ Enclosed is a check for \$375.00 to cover the total fees.
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- ☐ The filing fee is not being paid at this time.
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Date